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| <b>NOTICE OF APPEAL FROM THE EXAMINER TO<br/>THE BOARD OF PATENT APPEALS AND INTERFERENCES</b> |  | Docket Number (Optional)<br><b>249768011US1</b> |  |
| In re Application of<br><b>Lopez et al.</b>  |  |   |  |
| Application Number<br><b>10/664,820-Conf. #3436</b>  |  | Filed<br><b>September 17, 2003</b>              |  |
| For <b>METHOD AND SYSTEM FOR PRICE SUGGESTING USING<br/>ITEM-SPECIFIC ATTRIBUTES</b>           |  |   |  |
| Art Unit<br><b>3625</b>  |  | Examiner<br><b>M. Airapetian</b>                |  |

Applicant hereby **appeals** to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ 500.00

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ \_\_\_\_\_

☐ A check in the amount of the fee is enclosed.

☒ Payment by EFT Account No. SEA1PIRM.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-0665.

☐ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

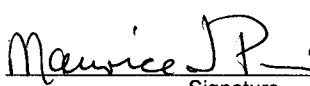
I am the

☐ applicant /inventor.

☐ assignee of record of the entire interest.  
See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

☒ attorney or agent of record.  
Registration number 33,273

☐ attorney or agent acting under 37 CFR 1.34.  
Registration number if acting under 37 CFR 1.34. \_\_\_\_\_

  
 \_\_\_\_\_  
 Signature  
  
 Maurice J. Pirio  
 \_\_\_\_\_  
 Typed or printed name  
  
 (206) 359-8000  
 \_\_\_\_\_  
 Telephone number  
  
 June 8, 2007  
 \_\_\_\_\_  
 Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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| <input checked="" type="checkbox"/> *Total of <u>1</u> forms are submitted. |
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